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THE EVOLUTION OF NURSING EDUCATION¹

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EVOLUTION is now an accepted idea in almost all phases of the world's life and activity. The old earth herself has gone through certain definite periods of geological development and her plant and animal life has been constantly changing in the process of adaptation to a changing environment. Species or races which failed to make such adjustments or could not compete with other organisms in the struggle for existence have invariably fallen by the wayside. It seems to have been much the same in the development of human society and social institutions. A modern writer observes that "in the struggle for existence among ideas those tend to prevail which correspond with the changing needs of humanity. They are not necessarily better or truer than those that they succeed, but they are better adapted to their age." By the same law social institutions such as law, religion and education, under the pressure of different economic and social conditions, take on new forms and characteristics which enable them to survive and to serve the needs of new generations.

Mr. Wells says of world history that it has always been a race between education and catastrophe. I am sure you will agree with me that whatever may have been the case in the past, the crisis in nursing today can be solved only by some kind of educational readjustment. The question is—What? Are we to grope around blindly hoping that we may hit on some happy formula to end our troubles, or shall we accept the suggestions of the people outside whose main diversion it seems to be to devise new ways of reforming us? Would it not be wiser to look into our own past and the experience of other vocations such as ours, and see if we cannot find some general law or principle which would aid us in this process of readjustment to modern needs and conditions?

The briefest survey of vocational education shows us that practically all vocations have gone or are going through a similar course of development. For our present discussion it is not necessary to debate the subject of whether nursing belongs to the jealously guarded group of "learned" professions or not. The general educational developments which have come about in law, theology, and medicine, have come also in engineering, architecture, dentistry,

¹ Read at the Annual Convention of the Illinois State Nurses' Association, Quincy, October 21, 1921.

social work, agriculture, home making, secretarial work, and dozens of other modern vocations, including trades as well as professions.

In outlining the main stages in vocational education, I shall follow the classification used by Dr. David Snedden in his recent suggestive and valuable book on Vocational Education. The *first* is what he calls the "pick up" stage where the training is entirely unorganized,—no definite period of initiation or graduation, no definite course of study, no recognized standards of fitness before one may practice the art or the trade. As a rule the learner is employed as a worker and gets his training as he goes along. It is stated that probably 90 per cent of all our workers in this country get their training in this haphazard way, among them the so-called "practical" machinists, carpenters, librarians, farmers, teachers, and "self made" business men.

The total number of nurses counted in our census reports include a fairly large group of "practical" nurses, with numbers of the short-course and correspondence-school type, whose training has been of this "pick up" kind. Some of our friends in the medical profession are inclined to recommend a reversion to this "neolithic" age of nursing, but in this they are against the whole weight of educational authority and experience and against the tide of evolution which moves steadily toward a better organized and more fully standardized type of training.

The *second* distinct stage is that of training by apprenticeship. Here the learner is put for a definite period of time under some master craftsman who undertakes to teach him the whole craft in return for his services. Sometimes an apprentice fee is also charged. This method of education was most fully worked out in the mediaeval guilds, the more exclusive guilds having rather an exacting course of practical training. Professional men as well as mechanics and tradesmen were trained by apprenticeship, indeed up to the last half century it was almost the only recognized method of securing any kind of definite vocational training. Professor Snedden states that probably only about 5 per cent of all workers are now trained by this method.

It is a well known law that all institutions carry with them the seeds of their own dissolution. The decline in apprenticeship as a method of education has been very rapid in recent years, partly because it was unable to adjust itself to the new demands of industrial and professional life, and partly because it was unsound on its economic side. Nursing is frequently quoted with journalism, acting, and library work, as the only modern professions still clinging to the apprenticeship method of training. If we study our own difficulties

today, we shall see that it was exactly these difficulties which brought about the break-down of the system in other vocations.

There are three elements entering into all vocational training: the principles which guide and explain the practical work, the technique or method of carrying out procedures, and the tradition and spirit of the craft, the social ideals, which bind the group together and inspire it with a high sense of its social responsibility.

The emphasis of the apprenticeship system has always been chiefly on practical work, and at its best it does turn out good practical workers, but even here its limitations are obvious. The primary end of the shop, or office, or institution which offers such training, is production or service, and as a rule everything else is subordinated to this. The apprentice is expected to be a producer, to make himself useful, and often the work required of him has little or no relation to his future occupation. Much time is wasted in the repetition of routine tasks far beyond their educational value, while there may be a great many important things that do not come into his experience at all. Exploitation of the apprentice in the form of long hours, over-work, etc., is almost inevitable and there is no redress. Everything depends on the individual employer who may or may not take his educational obligations seriously.

This difficulty becomes acute when the body of scientific and technical knowledge needed for the successful practice of a profession, becomes so large that it takes the apprentice away a good deal from his practical duties. Even where the employer is willing to give such instruction, he finds it difficult to provide the machinery—the laboratories, trained teachers, and equipment for getting the knowledge over to his apprentices. As science advances and the responsibility of practitioners in all modern technical vocations increases, the body of required knowledge in chemistry, physics, bacteriology, mathematics, etc., becomes larger and larger. Finally it reaches a point where the private employer cannot provide what education is needed without eating up all the profits from his apprentice labor. When this happens the day of the apprentice system is nearly done. There have been many other factors entering in to destroy the apprentice system in modern industry, but they relate chiefly to the use of machinery which has never played a large part in nursing work.

Many efforts have been made to bolster up the apprentice system by organizing shop schools or night classes in some existing college or technical school to supplement the deficiencies of the practical experience. Even yet some law students, drug clerks, and architects, as well as mechanics and tradesmen, are found trying to eke out their haphazard training in shop or office in this way. But the compromise

is rarely satisfactory either to the student or the employer. The period of training is unnecessarily long because it is impossible to concentrate on essentials and get all the daily work done. The experience is usually lopsided and full of gaps because of the limitations in resources of one special institution or shop, or the lack of systematic planning. On the other hand, unless the employer can depend on a fairly stable working force, he cannot get his work done well. He would usually prefer to pay a regular employee and be able to command his or her full time and service without undertaking any educational obligations whatever.

The *third* stage in vocational education comes at the point when the work of training is transferred to a school whose primary purpose is not production, not service to some individual or institution, but first and last, education. In the beginning many of these independent vocational schools were endowed by private individuals or by public contribution. Some of them were maintained almost wholly by students' fees. Gradually they have been taken over by the state or by public agencies and have become a part of the state controlled system of education. Think of the schools and colleges now supported by public funds—military and naval academies, normal schools, agricultural colleges, schools of domestic science, commercial schools, technical schools, and under our state universities, schools of medicine, law, engineering, dentistry, pharmacy, architecture, veterinary science, and many others.

In the beginning these schools tended to over-emphasize formal class room instruction, as the apprenticeship type had over-emphasized practice. Some of them cut themselves off entirely from their old practice fields and taught their students from books almost entirely. The result was disastrous to practical efficiency. More and more they are coming to realize the essential importance of well-directed practical work in any good scheme of vocational education. Some of them are buying and running their own farms, hospitals, and so forth. Others are arranging with business, industrial and philanthropic organizations to have their students gain certain kinds of experience as a required part of their professional training. This is not going back to the apprenticeship type of training. It may be voluntary or paid service that is given, according to the value that is agreed upon. The essential thing is that it shall be educational throughout, that it shall be a part of a well-integrated scheme having for its object the best possible training for that student, in his or her particular line of work. Except in state supported schools, the students pay for their education, but it is never expected (except perhaps in the more exclusive private schools) that the whole cost of

education shall be borne by students. There must be substantial endowments to draw upon for libraries and equipment, for teaching and research, as well as for constant growth and expansion to meet the new demands which any living and growing profession must meet or face stagnation.

Along with this marked tendency to transfer vocational education from private to public control has come a movement toward consolidation. Sometimes this has come voluntarily when two or three small, struggling schools have seen the advantages of uniting their forces in one strong, well-equipped institution. Often the older, poorer schools have been forced to close their doors because of the competition of schools of the newer progressive type. Sometimes the state steps in or a professional group, such as the American Medical Association, and refuses recognition to schools which do not meet certain standards. The tendency all through is to create and maintain more uniform and more effective standards of education.

It is not difficult to decide which stage of development the modern hospital school of nursing is in. Unquestionably we are in the apprenticeship stage with a few modifications. It is important to remember, however, that the first school of nursing founded by Miss Nightingale in 1860 at St. Thomas', London, was distinctly of the more advanced type. It was founded and endowed, not primarily for the service of the hospital, but for the training of nurses. A well-organized course of lecture and class work was established and the practical work was arranged so that the student could progress from one stage to another, according to her educational needs, and could receive constant practical instruction from expert supervisors employed for the purpose. The school was distinct from the hospital, on a separate foundation, and this was always Miss Nightingale's recommendation.

We know that her whole scheme for the training of nurses was determinedly opposed by the great mass of the hospital officials and the medical profession at that time, but so efficient was the practical work of those early student nurses, and so economical was their service to the hospital, that it was not long before hospitals adopted part, at least, of the new idea and formed schools, not on independent educational foundations, but as a working arm of the hospital itself.

Miss Nightingale was undoubtedly far ahead of her day in her educational vision as well as in many other things and probably the realization of the independent nursing school was too much to expect under the conditions of sixty years ago, but think what a difference it would have made to nursing! However, she did manage to build into those early schools many sound educational principles which were

defended and maintained by the women who succeeded her. In the face of persistent opposition, torn constantly between their responsibilities to the hospital on the one hand, and to their students on the other, with little freedom and practically no educational funds, the heads of our pioneer nursing schools somehow managed to satisfy the demands of the hospital and at the same time to push forward slowly toward better standards of nursing education.

At its best our system of training has far excelled the ordinary apprentice type of school, but it is doubtful if any exploitation of workers in the industrial field has been worse than that of some of the commercial hospitals and the poorer type of public institutions. Nursing organizations and public-minded citizens have done much to control the most flagrant of these evils by publicity and state legislation, but they could not remove the defects of the system itself which make such abuses inevitable. It is only their efforts and the devoted spirit of thousands of student nurses which have kept the apprenticeship system going so long in hospitals. The question is now, how much longer it can survive—how much longer we are going to help it to survive.

(*To be concluded*)

MENTAL HYGIENE FOR NURSES¹

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THE subject of mental hygiene is one which is not as well developed as some other branches of public health work. There is nothing in mental hygiene, for instance, which corresponds to the tooth brush in dental hygiene, or to quarantine in the field of infectious diseases; but there has been an accumulation of knowledge in the past few years which, while it does not solve our problems, has helped materially and should be possessed by all who come in contact with mental patients. Aside from acquiring the most up-to-date knowledge in this field it is usually necessary before entering it to rid oneself of a certain amount of prejudice.

Mental disease is still associated in some minds with mysticism and witchcraft. Also, because mental disease is such a handicap, many of its victims are found in poorhouses and jails. It is thought

¹ Read at the convention of the New England Nurses' Association, Concord, N. H., May 11, 1921.